

Amendment List

An original bill to repeal the sustainable growth rate system and to consider health care extenders
December 12, 2013

Committee Number	Senator	Summary
1	Rockefeller/Brown #1	Medicaid Managed Care Responsibility and Equity Act (S.1787)
2	Rockefeller/Nelson/ Brown #2	Medicare Drug Savings Act (S. 740)
3	Rockefeller #3	Fair Hospital Competition Act of 2013 (S. 1791)
4	Rockefeller/Brown #4	Transitional Medical Assistance Substitution and Improvement
5	Rockefeller/Grassley #5	Transitional Medical Assistance (TMA) Study, Substitution and Improvement
6	Rockefeller/Grassley/ Stabenow #6	Creating Qualifying Option in All-Payer Revenue Approach for Partial Qualifying APM Participants
7	Rockefeller/Brown #7	To make permanent the Qualified Individual Program (QI) for qualifying Medicare beneficiaries
8	Wyden/Isakson #1	The Better Care, Lower Cost Delivery System for Medicare Beneficiaries with Multiple Chronic Conditions
9	Wyden/Isakson #2	Prioritizing Chronic Care Delivery
10	Wyden/Isakson/ Carper/Grassley #3	An Amendment to Improve Medicare Advantage Risk Adjustment
11	Wyden/Isakson #4	An Amendment to Provide Chronic Condition Special Needs Plans with Enhanced Benefit Flexibility
12	Wyden #5	Promoting Unified Medicare and Medicaid Appeals Procedures
13	Wyden/Grassley #6	An Amendment to Improve and Modernize Medicaid Data Systems and Reporting
14	Wyden/Crapo #7	To Provide transparency for Adding Procedures to the Medicare Ambulatory Surgery Center List
15	Wyden #8	An Amendment to Include S. 562: Seniors Mental Health Access Improvement Act of 2013 in the Chairman's Mark
16	Wyden/Portman/ Carper/Enzi #9	An Amendment to Include S. 1228: Medicare Better Health Rewards Program Act of 2013

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17	Wyden #10	An amendment to Improve Medicare Advantage Benchmark Rate Calculation
18	Schumer/Grassley #1	Rural Hospital Access Act
19	Schumer #2	Delay Medicaid Disproportionate Share Hospital (DSH) Cuts for Two Years and Avoid Extraordinary Losses from Medicare DSH Cuts
20	Schumer #3	Home Health Care Planning Improvement Act
21	Schumer/Grassley #4	Helping Ensure Life- and Limb-Saving Access to Podiatric Physicians (HELLPP) Act
22	Schumer/Crapo #5	Cardiac and Pulmonary Rehabilitation
23	Schumer #6	Ensuring Access to Quality Complex Rehabilitation Technology Act
24	Schumer #7	Puerto Rico Medicare Part B Equity Act
25	Stabenow #1	To improve quality, and expand access to community mental health services
26	Stabenow/Casey #2	To clarify payments for drugs under Medicare Part B by excluding prompt pay discounts from Average Sales Price
27	Stabenow #3	To postpone the rebasing of home health payments to allow for further evaluation
28	Cantwell #1	To retain the weight of Quality and Resource Use performance categories in determining the score under the Value-Based Performance Program
29	Cantwell #2	To include hospitals operating "under arrangement" in the definition of "inpatient hospital services" under the Inpatient Prospective Payment System
30	Cantwell #3	To restore the Medicare Value-Based Payment Modifier
31	Cantwell #4	To allow the Secretary discretion to perfect the Medicare physician Value-Based Payment Modifier
32	Nelson/Schumer/ Stabenow/Menendez/ Casey #1	Residency Physician Shortage Reduction
33	Nelson/Grassley #2	Expansion of Medicaid Fraud Control Unit (MFCU) Federal Financial Participation (FFP) Eligibility
34	Nelson #3	Part D Beneficiary Appeals Fairness Act
35	Nelson/Grassley/ Rockefeller/Enzi #4	To amend title XIX of the Social Security Act to empower individuals with disabilities to establish their own supplemental needs trust

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36	Nelson/Rockefeller/ Casey #5	Annual Medicaid DSH Report
37	Menendez/Brown #1	To Clarify the Two-Midnight Policy for Medicare Inpatient Determinations
38	Menendez/Brown #2	To Provide Transparency in the Clinical Laboratory Fee Schedule and Establish a Demonstration Program to Test Appropriate Use Criteria in Clinical Laboratory Services
39	Menendez #3	Providing for Better Targeted Assistance to Small Practices
40	Menendez #4	To Correct for Misclassification of a Bladder Cancer Drug in the 2014 Outpatient Prospective Payment System Rule
41	Menendez/Nelson #5	To Provide Hospitals in Puerto Rico the Opportunity to Qualify for the HER Meaningful Use Program
42	Menendez #6	The Urban Medicare Dependent Hospital Preservation Act
43	Menendez/Brown #7	To Improve the Calculation of the Medicare Rural Floor
44	Menendez #8	To Provide Equity and Fairness in the Medicare Rural-Only Provisions
45	Menendez/Brown #9	To make the Family-to-Family Health Information Centers and the Maternal, Infant and Early Childhood Visitation program permanent
46	Carper/Bennet/Enzi/ Isakson/Thune/ Nelson #1	Preventing and Reducing Improper Medicare and Medicaid Expenditures (PRIME)
47	Carper/Toomey/ Bennet #2	Waiver Authority for Programs of All Inclusive Care for the Elderly (PACE) to participate in the Centers for Medicare and Medicaid Innovation Center programs
48	Carper/Isakson/ Rockefeller/Wyden/ Cardin #3	Quality Measurement to Encourage Health Care Providers' Transfer of Existing Patient Care Preferences
49	Carper/Toomey/ Brown #4	Improvements to Medicare Procedures to Prevent Fraudulent Diversion and Medically Unnecessary or Unsafe Use of Prescription Drugs
50	Carper/Enzi #5	GAO report to evaluate reforms to reduce medical liability costs, to improve health care quality, and to increase patient safety
51	Carper #6	Improving Accountability, Transparency, and Effectiveness of Oversight and Audit Activities under the Medicare Program

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52	Carper/Grassley #7	Increasing Patient Medication Education and Adherence
53	Cardin #1	Eliminating Beneficiary Coinsurance for New Chronic Care Management Codes to Encourage Participation
54	Cardin/Bennet/Brown #2	Targeted Outreach to Rural and Minority Communities for Participation in Care Management for Individuals with Chronic Care Needs
55	Cardin #3	Blocking further implementation of the Multiple Procedure Payment Reduction (MPPR) to the professional component of Advanced Diagnostic Imaging Services
56	Cardin/Portman #4	To encourage the use of efficient dispensing techniques for long-term care pharmacies
57	Cardin/Grassley #5	Community-Based Institutional Special Needs Plan Demonstration Program
58	Brown/Rockefeller/Stabenow #1	To Extend the Health Coverage Tax Credit for Displaced Workers
59	Brown/Stabenow #2	To count a period of receipt of outpatient observation services in a hospital toward satisfying the 3-day inpatient hospital requirement for coverage of skilled nursing facility (SNF) services under Medicare
60	Brown/Rockefeller/Stabenow #3	To Extend the Medicaid Parity with Medicare for Primary Care Reimbursement for an Additional Year
61	Bennet/Cornyn #1	To incentivize states to achieve reductions in future health care cost growth while improving quality
62	Bennet/Crapo #2	To establish a long-term global budget for total Federal health care spending
63	Bennet/Cornyn #3	To improve the transparency and predictability of Medicare local coverage decisions for molecular pathology services
64	Bennet/Toomey #4	To Require the Secretary of HHS to Conduct a Pilot Program to Improve Care and Lower Costs for the Highest Cost Medicare Beneficiaries
65	Bennet/Thune #5	To allow Medicare qualified entities to use secure and appropriate methods of technology to help providers to improve quality and transparency in healthcare delivery

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66	Bennet/Cornyn #6	To better inform taxpayers about their individual Medicare contributions and benefits by including information in a yearly statement they already receive about Social Security
67	Casey/Rockefeller/ Brown/Wyden #1	Performance Bonus Payment to Offset Additional Medicaid and CHIP Enrollment Costs Resulting from Enrollment and Retention Efforts.
68	Casey/Rockefeller/ Bennet/Brown #2	Express Lane Eligibility
69	Casey #3	Delay of CMS CY14 HOPPS Final Rule Implementation of Skin Substitute Bundling for Advanced Therapeutic Wound Healing Products
70	Grassley/Wyden #1	Transition to Independence Medicaid Demonstration
71	Grassley/Stabenow #2	Quality Care for Moms and Babies Amendment
72	Grassley/Wyden/ Carper #3	Medicare Risk Adjustment Prize for Performance Competition
73	Grassley #4	Cost Contracts Technical Amendment
74	Grassley/Bennett/ Toomey/Nelson/ Portman/Rockefeller/ Casey/Brown/Cantwell #5	Coordinated Care for Medically Complex Children
75	Grassley #6	Medicare Part D and Transparency of Payment Methodology
76	Grassley/Carper #7	Inclusion of Pharmacists as Providers in Medicare ACOs
77	Grassley/Casey #8	Continuing Care Retirement Communities and Medicare Demonstration Project
78	Grassley #9	Protecting Provider Licensure in Medicare and Medicaid
79	Grassley/Rockefeller/ Carper #10	Prevention of Diabesity Amendment
80	Grassley/Stabenow #11	Extension of Grandfather Clause for Subsidiary Educational Institutions
81	Grassley #12	Sunsetting the Independent Payment Advisory Board

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82	Grassley #13	Full GPCI Permanence
83	Grassley #14	Review of Secretarial Authority to Adjust the Value-Based Performance (VBP) Program
84	Grassley/Rockefeller #15	Removing Medicaid from the APM all-payer revenue calculation
85	Grassley #16	Funding for the OIG
86	Grassley #17	MACPAC Study of TMA Churning
87	Grassley #18	Full Substitute to the SGR Title of the Chairman's Mark
88	Crapo #1	Preventing tax increases on the middle class
89	Roberts/Casey #1	Expansion of MTM Targeted Beneficiary
90	Roberts/Enzi #2	Clarification of 96 Hour Rule for Critical Access Hospital Conditions of Participation
91	Roberts/Thune #3	Durable Medical Equipment Competitive Bidding Clarification
92	Roberts #4	Ensure Regulatory Accountability and Transparency of Implementation
93	Roberts #5	ObamaCare Repeal Amendment
94	Roberts #6	Preserving Access to Targeted, Individualized, and Effective New Treatments and Services (PATIENTS) Act of 2013
95	Roberts #7	Repeal the Individual Mandate Amendment
96	Roberts #8	Restoring Access to Medication Act
97	Enzi/Carper #1	An amendment to allow physician assistants (PAs) to provide and manage hospice care for Medicare beneficiaries.
98	Enzi #2	An amendment to title XVIII of the Social Security Act to provide for fairness in hospital payments under the Medicare program.
99	Enzi #3	An amendment to require the Department of Health and Human Services (HHS) and the Centers for Medicare and Medicaid Services (CMS) to seek public comment on whether proposed Medicare payment policies will increase or decrease the consolidation of health care providers.
100	Enzi/Crapo #4	An amendment to allow individuals to keep their health insurance plans if they like them.

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101	Enzi #5	An amendment to allow health insurance issuers to offer any insurance product on a state-based or federal exchange.
102	Enzi #6	An amendment to modernize the Medicare benefit through bipartisan, common-sense reforms.
103	Enzi #7	An amendment modernize the Medicare benefit through bipartisan, common sense reforms.
104	Enzi #8	An amendment to improve incentives for individuals to utilize and employers to offer medical flexible spending accounts (FSAs).
105	Cornyn #1	Protect seniors from a board of 15 bureaucrats empowered to make substantial changes to the Medicare without full transparency and accountability
106	Cornyn #2	Provide premium pricing transparency for Americans
107	Cornyn #3	Repeal the federal navigator program
108	Cornyn #4	Ensure Americans receive notification if their personal information is at risk.
109	Cornyn #5	Maintain the audit programs designed to identify fraud, waste, and improper billing while promoting fairness by allowing providers to rebill claims
110	Cornyn #6	Establish interoperability of electronic health records
111	Cornyn #7	Ensure that physicians are not required by the federal government to contract with a particular health plan as a condition of state licensure.
112	Cornyn #8	Require testing of ICD-10 prior to full implementation
113	Cornyn/Cardin #9	Evaluate the effectiveness of technical assistance funding and its impact on physicians practicing in rural areas and HPSAs.
114	Cornyn/Cardin #10	Evaluate the ability of physicians practicing in rural areas and HPSAs to transition from fee-for-service to APMs.
115	Cornyn #11	Ensuring broad stakeholder representation in quality measure endorsement and selection.
116	Cornyn #12	Increasing transparency by ensuring all stakeholders have an opportunity to provide comments on resource use methodology.
117	Thune/Bennet/Enzi/ Roberts #1	Provides a legislative clarification on the level of physician supervision that is required for outpatient supervision of therapeutic services at critical access hospitals.

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118	Thune/Casey/Enzi #2	To provide a demonstration project on remote patient monitoring (RPM) in the Medicare program to ensure seniors can remain in their homes longer and to prevent hospital readmissions.
119	Thune/Enzi #3	Requiring Interoperability in the Meaningful Use Program by 2017.
120	Thune/Rockefeller #4	Providing Additional Technical Assistance to Small Rural Practices in the Value Based Performance (VBP) Program.
121	Thune/Wyden/ Roberts/Rockefeller/ Enzi/ Stabenow #5	Promote Use of telehealth technology by ensuring payment and eligibility barriers to use telehealth do not exist in the Alternative Payment Models (APM).
122	Thune/Carper/Cornyn #6	Requiring transparency in the Alternative Payment Model (APM) development.
123	Thune #7	To address the application of the low-volume payment adjustment in the end-stage renal dialysis prospective payment system.
124	Thune/Isakson #8	Ensuring maximum physician-led participation in the Alternative Payment Model.
125	Thune #9	To ensure that the reinsurance fee for the transitional reinsurance program under the Patient Protection and Affordable Care Act be applied equally to all health insurance insurers and group health plans.
126	Isakson #1	Demonstration Project to Test Physician Private Contracting in Medicare
127	Isakson #2	Repeal of Medicare and Medicaid Disproportionate Share Hospital Cuts in Non-Expansion States
128	Isakson #3	MedPAC Study of Brokerage for Medicare Non-Emergency Medical Transportation Services
129	Isakson #4	Strike Extension of Health Workforce Demonstration Project
130	Isakson #5	Require Background Checks for Navigators
131	Isakson #6	Bundled Payments for Certain Radiosurgery Claims
132	Portman #1	Health Coverage Tax Credit Extension
133	Portman/Cardin/ Stabenow/Casey #2	Amendment to Ensure Medicare Beneficiary Access to Durable Medical Equipment

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134	Portman #3	Amendment to Improve Coordination in Behavioral Health Information Technology
135	Toomey/Carper #1	Standard of Care Protection
136	Toomey/Carper #2	GAO Report on Opportunities for Quality Measure Alignment
137	Toomey/Casey #3	Preserving Access to Orphan Drugs